

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO.

APPLICANT(S)

FILING DATE

12-18-03

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3	1					
4	1					
5	1					
6	3					
7	1					
8	1					
9	1					
10	1					
11	1					
12	5					
13	1					
14	1					
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48						
49						
50						
TOTAL IND.	5					
TOTAL DEP.	15					
TOTAL CLAIMS	20					

IND	DEP	IND	DEP	IND	DEP
51					
52					
53					
54					
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100					
TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					